

DOWNEAST DISTRICT:

Injury and Violence

Interpersonal Violence

Physical and sexual assault pose a serious threat to the public's health and safety, affecting not only individuals but families, employers and neighborhoods. While men experience more physical assaults overall, women are disproportionately victims and survivors of sexual assault and interpersonal violence. This can have long-term implications on health and well-being. Those who have been raped or experience domestic violence may have increased risk for further injury, chronic illness, and poor mental health, and often have trouble in accessing and experiencing medical care. Addressing violence across the lifespan is critical to improve health in Maine.

DHHS' Office of Child and Family Services at www.maine.gov/dhhs/bcfs/ and the Safe Families Partnership Initiative coordinated by the Division of Family Health at the Maine CDC at www.maine.gov/dhhs/bcfs are two key programs that are part of the State's efforts to apply a public health approach to prevent interpersonal violence.

Source: Department of Public Safety: County Crime Analysis
2001-2005

Source: Department of Public Safety: County Crime Analysis
2005

	Downeast District Number	Downeast District Rate (± Margin of Error)	Maine State Rate (± Margin of Error)
Reported Rapes ¹	10 (avg. per yr)	2.3 (±0.6) (per 10,000 female population)	2.8 (±0.1) (per 10,000 female population)
Domestic Assaults Reported to the Police ²	198	22.7 (±3.2) (per 10,000)	41.3 (±1.1) (per 10,000)

1. Source: Department of Public Safety: County Crime Analysis 2001-2005

2. Source: Department of Public Safety: County Crime Analysis 2005

Unintentional Injury

Unintentional injuries were the leading cause of death among 1-44 year olds in Maine in 2000-2004, and the 6th leading cause of death among all ages combined. Motor vehicle crashes are the most common cause of unintentional injury deaths in the state.

Unintentional falls were the leading cause of injury hospitalization among Mainers aged 65 and older in 2001-2005. Hip fractures in this age group are usually caused by falls and can result in reduced quality of life or premature death. Hip fracture hospitalizations are a key measure of the problem, and falls can be reduced or prevented.

The Maine CDC’s Injury Prevention Program tracks and analyzes injury data and has recently revised the Maine Injury Prevention Plan. Contact the program at www.maine.gov/dhhs/bohdcfh/inj/ .

Source: 2001-2005 Maine Office of Data, Research and Vital Statistics; Age-adjusted to 2000 U.S. Standard Population

	Downeast District Number	Downeast District Rate (± Margin of Error)	Maine State Rate (± Margin of Error)
Deaths for Unintentional Injuries Due to Motor Vehicle Traffic Crashes	17 (avg. per year)	19.2 (± 4.7) (per 100,000)	13.8 (±0.9) (per 100,000)

Source: 2001-2005 Maine Office of Data, Research and Vital Statistics; Age-adjusted to 2000 U.S. Standard Population
 ICD-10 Codes:V30-V39 (.4-.9), V40-V49 (.4-.9), V50-V59 (.4-.9), V60-V69 (.4-.9), V70-V79 (.4-.9), V81.1 V82.1, V83-V86 (.0-.3), V20-V28 (.3-.9), V29 (.4-.9), V12-V14 (.3-.9) , V19 (.4-.6), V02-V04 (.1, .9) V09.2, V80 (.3-.5), V87(.0-.8), V89.2

MAINE CDC – December 2007

Source: 2001-2005 Maine Hospital Discharge Datasets

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	Downeast District Number	Downeast District Rate (± Margin of Error) Rate per 100,000	Maine State Rate (± Margin of Error) Rate per 100,000
Hip Fracture Hospitalizations Among 65+ Year Olds – Overall	538	754.5 (±63.8)	751.3 (± 17.5)
65-74 Year Olds	82	222.3 (± 48.1)	214.1 (± 13.1)
75-84 Year Olds	212	851.1 (±114.6)	872.2 (± 31.8)
85+ Year Olds	244	2566.0 (±322.0)	2482.3 (±86.9)
Males	138	448.0 (±74.7)	443.5 (± 20.8)
Females	400	987.6 (±96.8)	974.6 (± 26.2)

Source: 2001-2005 Maine Hospital Discharge Datasets;

Definition: Discharges from Maine acute care hospitals for which the principal diagnosis is an injury (ICD-9 code 800-909.2, 909.4, 909.9, 910-994.9, 995.5-995.59, or 995.80-995.85) and the principal or secondary diagnosis is a hip fracture (ICD-9 code 820.x).